

IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION

IN RE:  
CLIO CIONNI RIZO  
DEBTOR

CASE NO: 25-30840-SWE-13

REPORT OF (ADJOURNED) SECTION 341 MEETING

General Case Information

Case Information:	<b>Hearing Information:</b> 341 Meeting Date: 04/21/2025 Days from Petition: 45 days Original 341 scheduled: 04/21/2025 Confirmation Hearing set: 5/29/2025 No Show/ID NOI Sent: NOI for 1st Pymt Sent:	<b>Payment Information:</b> Plan Base Amount: \$59,400.00 Plan Term: 60 months Current Monthly Payment: \$990.00 First Payment Due: Apr 06, 2025 Amount Paid to Trustee: \$990.00
Meeting Information:	Debtor(s) Appeared? Dr 1 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Dr 2 <input type="checkbox"/> Yes <input type="checkbox"/> No ID Checked: <input checked="" type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2 SSN Checked: <input checked="" type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2 Debtor(s) Attorney / Paralegal Appeared? <input checked="" type="checkbox"/> Pro Se <input type="checkbox"/> Creditor Appeared? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Hearing Status:	341 Meeting Concluded: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Debtor unable to connect to Zoom meeting Debtor was asked the standard questions: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Debtor confirmed that all the information contained on the Petition, Schedules, Statement of Financial Affairs, and CMI form was true and correct and needed no changes or additions to make them true and complete.	
Notice of Intent to Dismiss Information:	<input type="checkbox"/> Failure to Appear: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2 <input type="checkbox"/> Wage Directive Info: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2 <input type="checkbox"/> Tax Returns: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2 <input type="checkbox"/> Other: <input type="checkbox"/> Photo ID: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2 <input type="checkbox"/> SSN Card: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2 <input type="checkbox"/> Paystubs: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	
Legal Action Needed:	<input type="checkbox"/> Trustee's Motion to Transfer Venue Needed: <input type="checkbox"/> Serial Filer: <input type="checkbox"/> Other:	
<b>Confirmation Issues</b>		
Best Interest:	Exemptions: <input checked="" type="checkbox"/> Federal <input type="checkbox"/> State - Texas <input type="checkbox"/> State - Other: Exceeds \$189,050.00 <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> n/a Value (equity) of non-exempt property (provide detail below): \$0.00	

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	Total Value of Assets listed as Exempt on Schedule C: \$5905.57 Improper Exemption: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Explain: Fraudulent Transfer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Explain:	
Feasibility:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> <b>Objection to Confirmation needed for the following reason:</b> <input checked="" type="checkbox"/> Need DR 1 current paystubs   <input type="checkbox"/> Need DR 2 current paystubs <input checked="" type="checkbox"/> Trustee requests amended Schedule I to: reflect income from new job started on 04/14/25.	
Disposable Income:	<b>Below Median Income</b> Debtor's Projected Monthly Disposable Income: \$990.00 x ACP: 36 = \$35,640.00 Comment: Plan Payment <input type="checkbox"/> Case filed Below Median and should be Above Median	
Good Faith:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(Petition & Plan Issues:)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Insufficient Plan.	
Domestic Support Obligation (DSO:)	Is Debtor current on Post Petition DSO? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Tax Returns:	Filed previous 4 years <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Number of Exemptions on last year: 3 Notes: Number in Household per CMI: 3 Notes:	
Business Case:	Is this a Business Case? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Level:	
Civil Enforcement:	<input type="checkbox"/> Petition Preparer was involved <input type="checkbox"/> Debtor attorney fees exceed "Standard fee" Comment: 4250/0/4250	
521(a)(1) Information has been filed:	<input checked="" type="checkbox"/> List of Creditors <input checked="" type="checkbox"/> Statement of Financial Affairs <input checked="" type="checkbox"/> CMI Statement <input type="checkbox"/> Dr 1 60 Days Payment Advices <input checked="" type="checkbox"/> Schedules A,B,C,D,E,F,G and H <input type="checkbox"/> Dr 2 60 Days Payment Advices <input checked="" type="checkbox"/> Schedules I and J	
Eligibility:	Certificate of Credit Counseling within 180 days on file <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Provider of Credit Counseling is approved <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Debt limit exceeds maximum (S \$1,580,125 U \$526,700) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Required for Confirmation:	<input type="checkbox"/> Other reason(s) for Objection to Confirmation: <input type="checkbox"/> Additional document(s) required for Confirmation:	
Presiding Officer Information:	The 341 meeting was heard on: 04/21/2025 By: /s/ <u>Lisa Lynn</u> Office of the Standing Chapter 13 Trustee	

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